

Division of Water Resources

National Pollutant Discharge Elimination System (NPDES)

Application for Coverage Under General Permit NCG550000

Single Family Residences and/or facilities discharging ≤ 1000 gallons per day of domestic wastewater

FOR AGENCY USE ONLY										
Date Received										
Year				Month				Day		
Certificate of Coverage										
N	С	G	5	5						
Check #				Amount						
Assigned To:										

NOTICE OF INTENT

[Required by 15A NCAC 02H .0127(d)]; [term definition see 15A NCAC 02H .0103(19)]

(Please print or type)

	ase list the NCDENR Reg	gional Office representativ	ve(s) with whom you have m	net:					
Nar	me(s):		Date:						
Ma	ailing address of own	er/operator: (address t	to which all correspondenc	e should be mailed)					
Owi	ner Name								
City				ZIP					
Cei	l/Mobile #		Email						
	ation of facility producing discharge: (If facility is not yet constructed, give street address or lot #)								
City	4			ZIP					
	-			#					
	•								
•	ysical location inform								
				s, state road numbers, and dista					
and	direction from a roadwa	y intersection).							
	is NPDES permit app	olication applies to wh	ich of the following:						
Th		ee <u>15A NCAC 02H .0103(16</u>	or Proposed (system not c	constructed)					
Thi	New [term definition se			mitted by local or county healtl					
		ion see 15A NCAC 02H .	<u>0103(11)</u>]; If previously per	department, please provide the permit number					
	Existing [term definit								
	Existing [term definit department, please pr	ovide the permit number							

6.	De	scription of Discharge: [Required by <u>15A NCAC 02H .0105(c)(1)</u>]						
	a)	Amount of wastewater to be discharged:						
		Number of bedrooms x 120 gallons per bedroom =						
		gallons per day to be permitted						
	b)	Type of facility producing waste (please check one):						
		□ Primary residence□ Other:						
7.	Please check the components that comprise the wastewater treatment system: [Required by 15A NCAC 02H .0105(c)(3)]							
		Septic tank Dosing tank						
		Primary sand filter \Box Secondary sand filter \Box Recirculating sand filter(s)						
		Chlorination Dechlorination Other form of disinfection:						
		Post Aeration (specify type)						
		following options in the cover letter for this application: [Evaluation required by G.S. § 143-215.1(b)(5)(a) and 15A NCAC 02H .0105(c)(2)] a) Connection to a Regional or Municipal Sewer Collection System.						
	b)	Letter from local or county health department describing the suitability or non-suitability of the site for all types of wastewater ground adsorption and innovative non-discharge systems. Document the repair potential of the failed system.						
	c)	Land Application such as spray irrigation or drip irrigation.						
9.	Re	ceiving waters: [Required by 15A NCAC 02H .0105(c)(1)]						
	a)	What is the name of the body or bodies of water (creek, stream, river, lake, etc.) that the facility wastewater discharges end up in?						
	b)	Stream Classification (if known):						
10.	Th	ne application must include the following or it will be returned, as allowed by <u>15A NCAC 02H .0107(b)</u> :						
	a)	For <u>Certificates of Coverage</u> :						
		An original letter and two (1) copy requesting coverage under NCG550000.						
		A signed and completed original and one copy of this Notice of Intent Application.						
		A check or money order for the permit fee of \$60.00 [per G.S. § 143-215.3(a)(1b)] made payable to NCDENR.						
		Invoice showing that the septic tank has been pumped and serviced within the last 12 months (only when existing service tank will be used).						

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New or proposed facilities must also include: Letter from the county health department evaluating the proposed site for all types of ground absorption and innovative non-discharge systems. Document the repair potential of the failed system. Evaluation of connection to a regional sewer system (approximate distance & cost to connect). Provide a 7Q10 flow estimate at the proposed wastewater discharge point from the US Geological Survey (919-571-4000) b) For an Authorization to Construct (ATC) only: (Note: There is no fee for an ATC) A letter requesting an ATC Three sets of plans and specifications (required by 15A NCAC 02H .0138) of proposed treatment system (see

Invoice showing that the septic tank has been pumped and serviced within the last 12 months (only when

Additional Application Requirements:

Permit Application Checklist and Design Criteria for Single Family Discharge)

existing septic tank will be used).

- a) If this application is being submitted by a consulting engineer (or engineering firm), include documentation from the applicant showing that the engineer (or firm) submitting the application has been designated an authorized Representative of the applicant, per 15A NCAC 02H .0138(b)(1).
- b) If this application is being submitted by a consulting engineer (or engineering firm), final plans for the treatment system must be signed and sealed by a North Carolina registered Professional Engineer and stamped "Final Design Not released for construction;" per 15A NCAC 02H .0139.
- c) If this application is being submitted by a consulting engineer (or engineering firm), final specifications for all major treatment components must be signed and sealed by a North Carolina registered Professional Engineer and shall include a narrative description of the treatment system to be constructed; per 15A NCAC 02H .0139.

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CERTIFICATION

I certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief such information is true, complete, and accurate.

Printed Name of Person Signing:	
Title:	
(Please review <u>15A NCAC 02H .0106(e)</u> for authorized signing officials)	
(Signature of Applicant)	(Date Signed)

North Carolina General Statute § 143-215.6B provides that:

Any person who knowingly makes any false statement representation, or certification in any application, record, report, plan, or other document filed or required to be maintained under this Article or a rule implementing this Article; or who knowingly makes a false statement of a material fact in a rulemaking proceeding or contested case under this Article; or who falsifies, tampers with, or knowingly renders inaccurate any recording or monitoring device or method required to be operated or maintained under this Article or rules of the Commission implementing this Article, shall be guilty of a Class 2 misdemeanor which may include a fine not to exceed ten thousand dollars (\$10,000). 18 U.S.C. Section 1001 provides a punishment by a fine or imprisonment not more than 5 years, or both, for a similar offense.

Application must be accompanied by a check or money order for \$60.00 [per G.S. § 143-215.3(a)(1b)] made payable to:

NCDENR

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Mail this application and one copy of the entire package (with check) to:

NC DENR / DWR / Water Quality Permitting Section 1617 Mail Service Center Raleigh, North Carolina 27699-1617 Attn: Charles Weaver

Note: The submission of this document does not guarantee the issuance of an NPDES permit

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